DIRECTIONS FOR COMPLETING SCHOOL HEIGHT AND WEIGHT DATA FORM

Submit data as soon as possible after measurements are taken. Send all forms to:

Carrie Cushing
South Dakota Department of Health
615 E. Fourth St
Pierre, SD 57501-2535
Carrie.Cushing@state.sd.us

The data is preferred electronically but must contain the information and format of the attached form. The form is available electronically by emailing <u>Carrie.Cushing@state.sd.us</u>. If you have data stored in some type of electronic file already, we are willing to work with you to convert the data.

- 1. Complete: School Building Name, County, Grade Levels of School (i.e. Elementary, Middle School, High School), Mailing Address of school. Complete Contact Name, email address and mailing address, Building Principal's Name, Telephone Numbers and mailing address where each can be reached. This information is needed in case there are questions about the data. Use a separate page for each attendance center for which data is collected. Use data collection form available by email from DOH website (carrie.cushing@state.sd.us) or copy the form as many times as needed for the number of individuals measured.
- 2. Date of Measurement: Use a *separate page for each day* data is collected. Please send data as it is obtained rather than waiting until the end of the school year to send the recorded data. If the date the measurements are taken is September 20, 2022, record as follows:

Using the paper form:

mo.	day	year
09	20	2022

- 3. Name of student: This information is for <u>your use only</u> and should be removed before submitting the data.
- 4. ID#: Each child measured needs a unique identification number and three digits should be used (i.e., 001, 002, etc). The number is to be used for data collection purposes only. Please do not use an i.d. number more than once.
- 5. Sex: Enter the number corresponding to the gender of the student, 1=Male, 2=Female
- 6. Date of Birth: Record person's date of birth. If date of birth is May 8, 2011, record as follows:

Using the paper form:

mo. day year

05 08 2011

- 7. Ethnic Origin/Race: Enter the number corresponding with an ethnic origin/race below. This is to be completed by observation of race.
 5. Hawaiian or Pacific Islander
 1. White, not Hispanic
 6. Asian
- 8. **Height:** Enter height of student. Use **inches** to the nearest **1/8 inch**. Do not change denominator of fraction. Always convert to eighths: 3/4 should be converted to 6/8, 1/4 to 2/8, etc. For example, if height is 45 1/8 inches, record as follows:

7. Other

9. Not Specified

45	1/8
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2. Black, not Hispanic

4. American Indian or Alaskan Native

3. Hispanic

Allowable entries for numerator of fraction are 0-7 and 9. **Do not leave blank if zero**. Do not use 9 for unknown fraction unless inches are unknown also. If height is 62 inches, record as follows:

62	0/8

Do not use feet and inches, only total inches. A conversion table is provided.

9. Weight: Enter weight of student. Use pounds to the nearest **1/4 pound**. Do not change the denominator of the fraction. Always convert to fourths; 1/2 should be converted to 2/4, etc. For example, if weight is 56 1/2 pounds, record as follows:

Do not leave numerator of fraction blank if zero. Do not use 9 for unknown fraction unless pounds are unknown also. For example, 125 pounds should be recorded as follows:

125	0/4
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